## OSHA's Form 300A (Rev. 01/2004)

## Summary of Work-Related Injuries and Illnesses

Year 2009

U.S. Department of Labor Occupational Safety and Health Administration From approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0." Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirely. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 194.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

(3) Respiratory Condition	Total number of (M) (1) Injury (2) Skin Disorder	Injury and Illness Types	(K)	Total number of days away from work	Number of Days	(G)	0	Total number of deaths	Number of Cases
0	0 3	ypes				(H)	away from work 2	Total number of cases with days	
(6) All Other Illnesses	(4) Poisoning (5) Hearing Loss		183 (L)	Total number of days of job transfer or restriction		(0)	restriction 0	Total number of cases with job transfer or	
0	0		•			(J)	cases 1	Total number of other recordable	

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 50 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not trequired to respond to the collection of information unterest it displays a currently with ONB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor. OSHA Office of Statistics, Room N-3644, 200 Constitution Ave. NW. Washindon. DC 20210. Do not send the completed forms to this office.